United Nations A/58/PV.41

General Assembly

Official Records

Fifty-eighth session

41st plenary meeting
Wednesday, 22 October 2003, 3 p.m.
New York

President: The Hon. Julian R. Hunte ..... (Saint Lucia)

The meeting was called to order at 3 p.m.

Agenda item 50 (*continued*)

Integrated and coordinated implementation of and follow-up to the outcomes of the major United Nations conferences and summits in the economic, social and related fields

Report of the Secretary-General (A/58/359)

Ms. Ndhlovu (South Africa): South Africa aligns itself with the statement made by the representative of Morocco on behalf of the Group of 77 and China.

It is with a sense of proud achievement that the South African delegation contributes to the debate on the integrated and coordinated implementation of and follow-up to the outcomes of the major United Nations conferences and summits in the economic and social fields. Not only did we actively participate in all of the major conferences and summits that took place during the last decade, we were also privileged to host both the World Conference against Racism, Racial Discrimination, Xenophobia and Related Intolerance in 2001 and the World Summit on Sustainable Development in 2002.

South Africa strongly supports the recognition — given by resolution 57/270 B, which is the basis for discussions under this item — of the fact that we are beyond the normative debate and planning phase and have to ensure that the outcomes of major conferences and summits are indeed implemented. Having had these conferences and summits, we now face the challenge of ensuring that the decisions taken at these global meetings are implemented in a coherent and effective manner. In this regard, the principal result that South Africa would like to see from the implementation of these decisions is that they would ultimately lead to a better life for all mankind.

South Africa, as part of the developing world, knows the great difficulties in achieving the goals of freedom from want and freedom from fear. This is a challenge that cannot be addressed by any one country in isolation. It is indeed a challenge for all of us and must be addressed in a multilateral context.

In this context, the outcomes of the major United Nations conferences and summits provide a comprehensive basis for action at the national, regional and international levels, with the key objectives being poverty eradication, sustained economic growth and sustainable development. The fact that every country has the primary responsibility for its own economic and social development means that regional and international organizations, as well as the United Nations as a whole, also have a role to play in this important partnership. However, for this partnership to work, every Member State should undertake to implement the commitments it has made.

Africa has already shown its commitment to contribute to this notion of partnership by, among others, its active promotion and participation in the New Partnership for Africa's Development (NEPAD). This home-grown African initiative, so generously

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supported by the United Nations and other Member States and organizations, is seeking to address Africa's particular problems within a coherent and institutionalized framework of partnership and mutual benefit.

However important this regional framework is to addressing the issues confronting Africa, the need for a international socio-economic environment that is conducive remains critical for it to be successful. It is because of this recognition that South Africa has expressed its disappointment on the failure of the discussions in Cancún, while in the same vein pronouncing its determination to get the development round, as agreed upon in Doha, back on track. We also believe in the necessity to ensure the full participation of developing countries in setting the agenda and determining the norms for international interaction in the economic, financial and monetary fields.

However, the United Nations system also has an important responsibility to stay fully engaged in the implementation of agreements and commitments reached at the major United Nations conferences and summits. Of particular importance is the need to ensure that policy guidelines from the General Assembly and the Economic and Social Council on the implementation of the outcomes of the major United Nations conferences and summits be incorporated into the programmes of work and operational activities of the relevant funds and programmes of the United Nations.

My delegation recognizes the need to strengthen the role of the General Assembly as the highest intergovernmental mechanism for the formulation and appraisal of policy on matters relating to the coordinated and integrated follow-up to the major United Nations conferences and summits. At the same time, it is important to ensure that the working methods of its committees and plenary meetings allow for maximum focus and participation, in order to enhance the role of the General Assembly in reviewing the progress made in implementation.

With reference to the important role of the General Assembly as a deliberative and legislative body to set norms and guidelines, it is therefore regarded as the ideal authority for overall monitoring and oversight of implementation regarding decisions taken in multilateral forums. The convening power of the United Nations, as was seen in the major summits and conferences of the past decade, and as was reflected, for example, by the highest level of participation at the Millennium Summit, the International Conference on Financing for Development and the World Summit on Sustainable Development, suggests that the United Nations should play an overall coordination and monitoring role, overseeing the implementation by all actors, including from national Governments, regional and global institutions and civil society.

The Economic and Social Council can and should act as the central mechanism for system-wide coordination and should also continue to be strengthened. In that regard, my delegation is particularly supportive of the recommendation made in resolution 57/270 B, that the Economic and Social Council should review on a regular basis, by means of a cross-sectoral approach, the progress made in the implementation of the outcomes of the major United Nations conferences and summits and their follow-up processes and to assess its impact on the possible achievements of the goals and the targets of the conferences and summits. The role that the Statistical Commission could play by refining and finalizing indicators to assess the implementation of commitments and the achievement of development goals remains crucial.

In the ambit of partnership, it is also important to recognize the important role that the Bretton Woods institutions and the World Trade Organization (WTO) should play in the implementation of the outcomes of major United Nations conferences and summits. The high-level meeting every spring between the Economic and Social Council, the Bretton Woods institutions and the WTO, during which time the important issue of coherence and consistency of the international monetary, financial and trading systems in support of development and other matters are discussed, is already an indication of the effort to implement the decisions made at Monterrey to improve dialogue and coordination between the United Nations and those institutions. This bodes well for future discussions on the international development agenda and for taking stock of progress made in the implementation of the Monterrey Consensus.

At the same time, acknowledgement should also be given to the important role that non-governmental organizations, community based organizations and the private sector should play in the coordinated

implementation and follow-up to the outcomes of the major United Nations conferences and summits in the economic and social fields.

The successful implementation of the outcomes of the major United Nations conferences and summits lies with all of us — Member States, non-governmental organizations and the United Nations system. The commitments made during these conferences and summits will come to nothing if we do not show the necessary political will to succeed. The goals that we have set ourselves at these major meetings to eradicate poverty and to improve the lives of millions of people are in danger of not being achieved.

I would also like to briefly reflect on the follow-up to the outcome of the special session on children.

The international community made profound commitments to children at the special session on children and endorsed unanimously the Declaration and Plan of Action, "A World Fit for Children". The Convention on the Rights of the Child and its Optional Protocols serve as a landmark treaty due to its almost universal ratification by Member States. The voices of children and their concerns and aspirations form an integral part of the outcome document adopted in 2002. These commitments to building a world fit for children must compel us to implement our obligations as a matter of priority, since the issues at stake, as Secretary-General Kofi Annan said, are about the future of humanity.

The international community is faced with global crises and a number of conflicts, which in all instances involve the lives of children caught up in conflict and humanitarian disasters. Yet, in many parts of the world, the challenges to improve children's lives have moved forward. The work of the United Nations Children's Fund (UNICEF), in partnership with Governments, has continued to address the rights of children in a comprehensive manner. Numerous national plans, based on the outcome of the special session, are in place and are being implemented. The international community therefore has a road map before it and should continue to deliver its promises to the children of the world.

In closing, allow me to voice my delegation's support for the recommendations made by the Secretary-General in his report (A/58/228) to address the serious issue of global road safety. It is again highlighted that the burden of road traffic injuries falls disproportionately on people in low-and middle-income countries, with Africa possessing the highest road traffic death rate of 28 deaths per 100,000 population. World Health Organization projections suggesting that by 2020 road traffic injuries would rank third among causes of death and disability, ahead of such other health problems as malaria and HIV/AIDS, is a serious concern. The impact that this could have on the sustainable development of the developing countries speaks for itself.

I would, therefore, in particular, support the recommendation made by the Secretary-General in his report for stronger international cooperation to support the development of the national capacities of Member States in need thereof to address this problem. The role that the United Nations system could play in addressing global road safety could be, among others, the identification of a coordinating body within the United Nations system to facilitate and coordinate the efforts of global road safety. Such an effort should be welcomed.

Mr. Kazykhanov (Kazakhstan): Let me, at the outset, express our appreciation to the Secretary-General for his report prepared under agenda item 50, entitled "Integrated and coordinated implementation of and follow-up to the outcomes of the major United Nations conferences and summits in the economic, social and related fields". In our view his report is the result of the thorough and comprehensive work carried out by the Secretariat and by the delegations of Member States that made recommendations under this agenda item within the framework of the open-ended ad hoc working group headed by the President of the Assembly.

We are encouraged by the report's observation that the global consensus generated by the United Nations summits and conferences of the last decade on issues of poverty eradication and sustainable development as central concerns of national and international policy frameworks has renewed the relevance of the work of the United Nations in the economic, social and related fields, and of its mission to guide and harmonize policies for development.

In that regard, the Millennium Summit truly marked a turning point in the process of transforming the emerging global consensus into specific goals and targets, backed by political commitment at the highest level. We pledged in the Millennium Declaration to

strengthen international solidarity and partnership in order to attain the Millennium Development Goals in a timely manner.

We share the view that the International Conference on Financing for Development and the World Summit on Sustainable Development — two major conferences, held last year in Monterrey and Johannesburg respectively — have proved to be very useful global events in terms of offering focused mechanisms to monitor progress towards attainment of the Millennium Development Goals.

At the same time, the issue of conceptual integrity of various efforts to follow up on the outcomes of those international summits and conferences is highly relevant in view of the need to ensure better coordination of global, regional and national activities for development. In this regard, it is my delegation's view that the existence of a structure for integrated and coordinated implementation and follow-up is the key to promotion of mutually reinforcing action in the pursuit of the internationally agreed development goals.

Kazakhstan shares the view that an enabling environment at the national and international levels is of critical importance for attaining the agreed development goals. As for our country, we can say that it has become possible to successfully incorporate our development-goals commitments into our long-term national programmes and strategies as a result of the political will, clearly expressed by our leaders, to pursue the development of Kazakhstan, guided by the principle of the State's economic and social responsibility vis-à-vis its citizens.

Kazakhstan's report on the Millennium Development Goals, the first such report submitted by a country of the Commonwealth of Independent States (CIS), demonstrated that those goals are fully reflected in our existing national development strategies, policies and programmes. We also agree that an enabling environment at the international level requires enhanced partnership between donor and recipient countries, based on a recognition of the national leadership and ownership of the development goals, as well as on sound policies and good governance at the national and international levels.

To achieve the internationally agreed development goals, it is necessary to step up efforts to mobilize and effectively use financial resources as a means of implementation. Reaching the United Nations target for official development assistance of 0.7 per cent of gross national product, along with the mobilization of the domestic resources of recipient countries, should be considered a key factor in attaining such important goals as the elimination of poverty, the improvement of social indicators, the achievement of better living standards and the protection of our environment.

In that regard, our delegation attaches great importance to the High-Level Dialogue on Financing for Development to be held next week in accordance with the Monterrey Consensus in order to coordinate, at the intergovernmental level, follow-up to the Monterrey Conference.

Kazakhstan believes that the role of the United Nations system, including the Bretton Woods institutions and the World Trade Organization (WTO), is as crucial as ever in terms of assisting Governments in their efforts to comply with their development-goals commitments. The joint spring meetings of the Economic and Social Council, the WTO and the United Nations Conference on Trade and Development (UNCTAD) should continue to be an important instrument to monitor the progress of the United Nations system in this area of international cooperation.

Our delegation would like to welcome the decision of the eleventh session of the Commission on Sustainable Development to move to a biennial cycle of work as an example of a coordinated approach to the implementation of the outcomes of the major United Nations summits and conferences. That decision, in our view, should facilitate a more meaningful assessment of progress in the follow-up to the outcomes of the major United Nations summits and conferences.

We also believe that an implementation review process should be used to reaffirm the goals and objectives agreed upon at conferences and summits and to identify obstacles and constraints as well as actions and initiatives to overcome them. In this context, a major event to be held in 2005 to review the progress achieved in implementing all the commitments made in the Millennium Declaration, as referred to by the General Assembly in its resolution 57/270 B, would, we hope, contribute to that process.

In conclusion, I would like to reiterate our conviction that the United Nations should continue to

play a critical role in ensuring steady progress towards forging global partnerships for development and the implementation of the outcomes of global forums.

Mr. Jenie (Indonesia): Let me first thank the Secretary-General for his report on this important item (A/58/359). Also, we associate ourselves with the remarks made by the distinguished representative of Morocco on behalf of the Group of 77 and China.

The time has come for us to meet the challenges posed by the lack of progress in the implementation of the outcomes of the major United Nations conferences and summits in the economic, social and related fields. We must live up to the commitments made at the conferences and summits, where together we established internationally agreed development goals aimed at eradicating poverty, achieving sustained economic growth and promoting sustainable development.

Indeed, solid platforms for action emerged from those international gatherings to facilitate the achievement of development goals and targets, including the Millennium Declaration and the outcomes of the International Conference on Financing for Development and the World Summit on Sustainable Development. Thus, we must move from the phase of goal-setting and commitment to the phase of concrete implementation at the national, regional and international levels. The international conferences and summits also successfully engaged civil society, non-governmental organizations, the private sector and other relevant stakeholders in the development process. As stated in the Secretary General's report, "They thus marked the first crucial phase in the process of bringing development issues to the forefront of the multilateral agenda" (*A/58/359, para. 4*).

With this background in mind, my delegation welcomed resolution 57/270 B on the subject before us. We believe that this comprehensive resolution should be used for guidance and as the basis for the work of the relevant United Nations bodies and other stakeholders responsible for implementing the outcomes of the conferences and summits.

At the national level, appropriate policies and development strategies are indeed crucial for achieving the agreed development goals. The fact is that domestic economies are interwoven with the global economic system; that underlines the need to establish an enabling international economic environment to support national development efforts. In fulfilling this goal, it is important to stress, inter alia, the need to enhance partnerships between developed and developing countries; the importance of strengthening the coherence of the United Nations system, including the Bretton Woods Institutions and the World Trade Organization; and the need to engage other relevant stakeholders, including civil society and the private sector, in this process.

This holistic approach will necessarily require the formulation of a global strategy. In the context of the agenda item before us, such a move will be a step in that direction. For that purpose, the initiative taken by the Secretary-General to establish a high-level panel of eminent personalities is certainly relevant and timely. In that regard, my delegation takes this opportunity to call on the high-level panel of eminent personalities to strengthen efforts aimed at integrating and coordinating implementation of and follow-up to the outcomes of the major United Nations conferences and summits. Other United Nations bodies have equally important roles to play in this regard.

The General Assembly and the Economic and Social Council and its relevant functional commissions, acting as a three-tiered system for follow-up to and review of the conferences, are all playing crucial roles in the implementation process. It is therefore important to ensure that each of those organs fully grasps the linkages between the outcomes of the major United Nations conferences and summits and, as part of a joint effort, contributes towards achieving an integrated framework for the implementation of the internationally agreed development goals.

Furthermore, it is essential to strengthen the links between policy development at the intergovernmental level and the operational work being undertaken at the country level by the funds, programmes and specialized agencies of the United Nations system, including the Bretton Woods institutions and the World Trade Organization. Such an approach will foster the greater coherence of the whole range of activities and undertakings initiated by the funds, programmes and other relevant organizations and bodies of the United Nations as they work towards the realization of the outcomes of the conferences and summits.

Towards those ends, we should strive for greater coherence and coordination in the work of the General Assembly, especially in plenary meetings and in the

Second and Third Committees. That would ensure that the system is fully equipped to effectively adopt an integrated approach to follow up the outcomes of the conferences and summits.

Concerning the programme of work of the Second Committee, my delegation is of the view that the restructuring and mainstreaming of its agenda needs to be reflected in the framework for the integrated and coordinated implementation of and follow-up to conference outcomes. That must be done without diluting any agenda items, such as those concerning debt, trade or financing for development, that are of critical importance to developing countries.

Another positive measure that could aid the implementation process is the possible comprehensive review in 2005 of actions taken to achieve that goal. It is believed that such a major event would prove politically attractive and powerful for Member States.

Accordingly, the review process should be placed high on the agenda of the General Assembly, coinciding with the decision taken at the fifty-seventh session and taking into account the need to give more importance, coherence and visibility to the implementation of the Millennium Declaration. In that regard, I would like to stress that the importance of such a review should be viewed within the framework of the integrated and coordinated follow-up to the outcomes of major United Nations conferences and summits.

In achieving our objective, my delegation would like to emphasize the crucial role of the General Assembly as the highest inter-governmental mechanism and the most important tool for the appraisal of policy on matters related to the integrated and coordinated follow-up to the major United Nations conferences and summits. The General Assembly must ensure that the goal of integrating and harmonizing policy guidance, based on the recommendation of the Economic and Social Council as the coordinating mechanism of the functional commissions and specialized agencies, is put into effect. Moreover, the General Assembly should begin to enhance policy coherence among the United Nations system, the Bretton Woods institutions and the World Trade Organization in achieving development goals, particularly in eradicating poverty, promoting food security and enhancing sustainable development.

In conclusion, my delegation would like
reaffirm that the focus must be on implementati
while preserving the thematic unity of each of
conferences and summits and their respective follo
up mechanisms. To gear up further, we should al
seek to ensure that the implementation proc
complements the ongoing reform process of the Uni
Nations as a whole. However great the challenge m
be, one has to be optimistic in realizing the
objectives. It is our hope that we shall not mo
backwards but display the political will to progr
consistently, as required by General Assembly in
resolution 50/227 on further measures for
restructuring and revitalization of the United Nations
the economic, social and related fields.

Mr. Neil (Jamaica): Jamaica associates itself w
the statement made by the representative of Moroc
on behalf of the Group of 77 and China. We also j
previous speakers in thanking the Secretary-Gene
for his report on the integrated and coordinat
implementation of and follow-up to the outcomes
the major United Nations conferences and summits
the economic, social and related fields (A/58/359). T
report provides a useful assessment of the prelimina
steps being taken to implement resolution 57/270 B.

The adoption of that resolution marked
important step in support for the consensus on the ne
for a sharper focus on implementation. It creates
framework for linking policy development at
intergovernmental level and operational activities at
country level. If we are to meet the Millenni
Development Goals and ensure that concrete a
practical efforts are made to achieve the various go
we have set in the extensive set of conferences a
summits, all United Nations bodies should work
concert to improve coordination in support
implementation.

While only four months have elapsed since
adoption of the resolution, we are pleased that,
indicated by Secretary-General, concrete steps
being taken in a number of areas both in the Gene
Assembly and in the Economic and Social Council
give effect to crucial decisions and recommendatio
However, we would have liked to have been provi
with some detail with respect to the actual function
of the follow-up mechanisms established in accorda
with chapter III of the Monterrey Consensus in orde
facilitate an in-depth analysis and assessment of
work done to date. It is important that in fut

sessions of the General Assembly special emphasis be placed on providing such material.

With regard to further action to be taken by the General Assembly during this fifty-eight session to support implementation of the resolution, we urge that every effort be made to expedite consideration of the revised indicative programme of work of the Second Committee to allow a decision to be taken by the stipulated deadline in December 2003. It is important, however, that the question of restructuring the work of the Committee be carefully addressed and that the quality of the deliberations and the effectiveness of the Committee's work not be negatively affected. It is particularly important that issues of particular interest to developing countries and to the ongoing debate on global economic policy not be overshadowed in any way and continue to be given priority.

We welcome the recommendation for increased consultation between the Presidents of the General Assembly and of the Economic and Social Council, and we urge that concrete steps be taken to ensure the institutionalization of such contacts.

The Economic and Social Council has a central role to play in providing oversight, and it remains the most appropriate body for coordinating follow-up on the implementation of the commitments made at major United Nations conferences and summits. There is a clear need for enhanced coherence, coordination and cooperation at the intergovernmental level between the Economic and Social Council and intergovernmental organizations such as the Bretton Woods institutions and the World Trade Organization (WTO). The annual spring meetings between the Council, the Bretton Woods institutions and the WTO should therefore be strengthened, and we welcome the Council's decision, in its resolution 2003/47, to invite representatives of the Trade and Development Board of the United Nations Conference on Trade and Development (UNCTAD) to participate in future sessions.

In order to improve the value of these exchanges, however, it is important that the outcomes of those meetings provide concrete, action-oriented proposals which will have practical effect in the operation of these bodies with respect to development issues. This would facilitate more effective coherence and pragmatic actions in support of follow-up, particularly of the Monterrey Consensus.

It is important in all of this that we do not lose focus by over-concentration on analysis of themes and cross-cutting issues. We should not be converting the review of implementation into a complicated academic exercise. To avoid this, the Economic and Social Council should maintain a special focus on monitoring. Jamaica had supported the establishment of a separate monitoring mechanism, but, since that was not forthcoming, it is hoped that the Council will fulfil that role.

In this context, my delegation hopes that the decision that the Economic and Social Council conduct reviews through the consideration of cross-sectoral thematic issues common to the conferences outcomes will not detract from the need to monitor indicators and concrete steps by all actors to meet specific targets. In this respect, the Secretary-General and the Department of Social and Economic Affairs should support this approach by informing the Council of specific details and progress, or lack thereof, in relation to commitments made at the major conferences. That would enable the General Assembly to address concrete challenges to implementation on an ongoing basis.

The functional commissions have an important role to play within their respective mandates to improve the effectiveness of the Economic and Social Council in follow-up. By better planning its work on common conference themes, the Council will be able to engage with the functional commissions. We expect those commissions, in order fully to support the Council, urgently to review their working methods with a view to directing greater attention to the outcomes of major conferences. We look forward to an early report from the Commissions to the Council on their efforts.

We believe that well-organized and effective reviews of major United Nations conferences and summits are vital for maintaining political momentum, raising awareness and assessing new challenges and constraints to the implementation of commitments. We agree that the question of periodicity and of the format of reviews should be carefully considered on a case-by-case basis. That approach should not, however, serve to frustrate efforts to undertake much- needed reviews and ongoing assessments of the implementation of the conference and summit outcomes.

The holding of a major event during the General Assembly in 2005, which would ensure a

comprehensive review, is therefore welcome. It will represent an important opportunity for the international community to take stock of the progress being made. The ongoing work in ensuring implementation is one of the important elements in the revitalization of the General Assembly and therefore should be treated as a matter of the highest priority.

Mr. Rao (India): We thank the Secretary-General for his report on the integrated and coordinated implementation of and follow-up to the outcomes of the major United Nations conferences and summits in the economic, social and related fields. My delegation associates itself with the statement made by the Permanent Representative of Morocco in his capacity as Chairman of the Group of 77.

We welcome the adoption by the General Assembly of resolution 57/270 B, which provides, in our view, a framework for the General Assembly to provide political oversight to the implementation of and follow-up to the major United Nations conferences held over the past decade.

The objective of any follow-up exercise should be to address the issue of implementation. The major United Nations conferences and summits have in their outcomes a set of well-defined targets and commitments for which all Member States have accepted a shared responsibility. The implementation of outcomes would be a clear demonstration of the fulfilment of such shared responsibility and would contribute immensely to the strengthening of the United Nations.

For the developing countries, the implementation of the outcomes of the major United Nations conferences and summits presents an enormous challenge. They are not in a position to fulfil all the commitments they undertook with respect to the outcomes of such events, especially as regards the Millennium Declaration, without further progress in international cooperation. The developed countries have special obligations in the areas of official development assistance, debt relief and market access.

Reviewing the implementation of conference outcomes requires a two-pronged approach. First, it needs an integrated and coordinated approach to the overarching goals common to all or many of the conferences. Secondly, it also requires a focused review that seeks to retain the identity and integrity of every major conference and to stimulate progress in the implementation of agreements in the specific area or sector covered by each conference. The Economic and Social Council and its functional commissions can play a major role in addressing this task. To that purpose, the Council will pursue the establishment of a multi-year programme of work for the consideration of identified cross-sectoral thematic issues.

We welcome the opportunity to assess the functioning of the follow-up mechanisms established pursuant to the Monterrey Consensus. We would like to see greater synergy between the annual meeting of the Economic and Social Council with the Bretton Woods institutions, the World Trade Organization (WTO) and the United Nations Conference on Trade and Development (UNCTAD) on the one hand and the biennial high-level meeting of the General Assembly on the other. Apart from the high quality of the dialogue in terms of issues addressed and level of specificity, what we also require is an effective mechanism to assess the implementation of commitments and agreements reached in the Monterrey Consensus.

The report of the Secretary-General (A/58/359) speaks in paragraph 11 of the need to establish a stronger link between policy guidance and operational activities, as provided for in resolution 57/270 B. We would, however, like to sound a note of caution in that regard. The principal foundation for the operational activities of the United Nations development system is country-driven programming or, in other words, the United Nations system responding to the needs and priorities of the recipient countries. We believe that nothing should be done to undermine that principle. The linkage provision should not be misused to thrust donor-driven or Secretariat-driven agendas on the developing countries. The only possible link would be to ensure that the activities of the funds and programmes in recipient countries advance the implementation of the conference outcomes.

On the question of the review of the Second Committee's programme of work, my delegation would like to point out that the exercise must not be seen in isolation but should be viewed as part of the efforts for the revitalization of the General Assembly. Any decision that might be taken in the limited context of the Second Committee should be subject to review in the light of decisions that are adopted in the overall process of revitalization of the General Assembly and reform of the United Nations.

The report presented by the Secretary-General this year on the implementation of the Millennium Declaration (A/58/323) contains several useful suggestions. We agree with the proposal made by the Secretary-General for the holding of a major event in 2005. Such an event should provide an opportunity for a comprehensive review of the progress achieved in implementing all the commitments made in the Millennium Declaration.

Mr. Maalouf (United States of America): The United States welcomes the opportunity to speak on the integrated and coordinated implementation and follow-up to the outcomes of the major United Nations conferences and summits in the economic, social and related fields. We strongly support the need to frame our work at the United Nations around the outcomes of the major summits and conferences and we participated actively in the open-ended ad hoc working group on this subject. We recall that the Secretary-General has pointed out the urgent need for us to take a critical look at all of the General Assembly's activities and ask ourselves whether they are relevant to the implementation of the Millennium Declaration and other conference outcomes and whether they have the desired impact.

While recognizing that the working group's report was only adopted in June and that it is therefore somewhat premature to report on outcomes, we must not lose sight of the fact that a number of fairly modest recommendations came out of that group, recommendations which can be acted on during this General Assembly session. We are pleased that the bureaux of the Second and Third Committees have discussed overlap and duplication and are looking for ways to take up, in a more coordinated manner, issues relating to conference follow-up.

As stated in resolution 57/270 B, the Second Committee is to consider its programme of work and make a decision on it by December 2003. Members need to bring the vision and commitments of the major summits and conferences — such as the Millennium Summit, the Monterrey International Conference on Financing for Development and the World Summit on Sustainable Development — to the work of the Second Committee. We need to move towards partnerships and action and away from sterile rhetoric and timeworn themes.

The United States welcomes the mandate of resolution 57/270 B by which the Economic and Social Council functional commissions must examine their method of work in order to better pursue the implementation of the outcomes of major United Nations conferences and summits. The ongoing work of the Commission on Sustainable Development offers us an example that the other Economic and Social Council functional commissions may wish to consider following. Last May, the Commission, at its eleventh session, adopted a series of trail-blazing reforms. Members agreed to limit the number of negotiations and to focus on how the international community — Governments, international organizations, civil society and the private sector — can work together to achieve our ambitious and critically important objectives. Taken together, these steps will make the Commission on Sustainable Development and the United Nations more responsive and relevant to the needs of all, especially developing countries.

We look forward to working constructively with other delegations to follow through on the challenging task before us.

The President: We have heard the last speaker in the debate on this item for this meeting.

Agenda item 51

2001-2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa

Note by the Secretary-General (A/58/136 and Corr.1)

Mr. Alessandro (Italy): I have the honour to speak on behalf of the European Union. The acceding countries Cyprus, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Malta, Poland, Slovakia and Slovenia, the associated countries Bulgaria, Romania and Turkey and the European Free Trade Association country member of the European Economic Area Norway align themselves with this statement.

This important debate is yet another indication of the attention that malaria control and prevention has received throughout the international community, particularly after the World Health Organization, together with UNICEF, the United Nations Development Programme and the World Bank, founded

the Roll Back Malaria Partnership and since the holding of the Abuja Summit in 2000. Over the last few years, we have seen a change in attitude that has placed malaria high on the agenda of Governments, international organizations and development programmes. Through the Roll Back Malaria Initiative and the Global Fund to Fight AIDS, Tuberculosis and Malaria, a new form of co-operative partnership has started between low-income countries and the donor community.

The European Union warmly welcomes such developments. We recognize the need for more resources to implement concrete actions, but, at the same time, we must be aware that those resources are limited and should be used primarily to create continuity in awareness and support. That means day-by-day support at the grass-roots level, involving Governments, local communities and aid agencies in a participatory manner, in order to meet the targets agreed upon for the Decade to Roll Back Malaria.

We fully endorse the final declaration of the Second Summit of the African Union, in which Heads of State and Government confirmed that the fight against HIV/AIDS, malaria and tuberculosis is a priority for the continent. The burden of those diseases and their impact on the population are heavy, and they inevitably affect development initiatives planned within the New Partnership for Africa's Development (NEPAD) and the Group of Eight Africa Action Plan.

This year, more than a million people will die from malaria. Many more will contract the disease. Of the 500 million people suffering from malaria, 450 million, representing 90 per cent of the total, are sub-Saharan Africa's poorest citizens. In addition, we are aware that malaria costs Africa from $10 billion to $12 billion annually in its gross domestic product. That includes medical costs, missed schooling, lower productivity, less foreign direct investment and lower tourism revenues. Moreover, malaria claims the lives of many African children every day. The European Union expresses its deepest concern at this situation and its willingness to act to reverse it.

To end this cycle of suffering and poverty, Governments and the private sector are accelerating malaria research. As we pick up the pace on malaria research, we must also greatly expand existing prevention, care and treatment approaches, which are mutually dependent. Global funding to combat malaria will require resources matching the scale of the crisis. Approximately $60 million a year is invested in malaria research, and $200 million is spent annually to treat impoverished patients and distribute mosquito nets and insecticides. In that regard, the European Union is committed to strengthening and increasing financial support for research and development.

Allow me to describe briefly the actions we have undertaken so far. Under the last European framework programme, covering the period 1998 to 2002, we implemented 26 different research projects on malaria at a cost of more than 30 million Euros. Nearly 100 research institutions, based in 15 African countries, 11 European countries and five Asian and South American countries, participated in the project. Through that partnership to tackle malaria, we encourage strengthened cooperation within the framework of international initiatives such as the European Malaria Vaccine Initiative, the African Malaria Vaccine Trial Network and the new European-Developing Countries Clinical Trial Partnership.

Furthermore — following as well the recommendations made in General Assembly resolution 57/294 on the Decade to Roll Back Malaria — last July the European Parliament and the European Council adopted a regulation on assistance in fighting poverty-related diseases in developing countries, namely HIV/AIDS, tuberculosis and malaria. In allocating funding and expertise, priority will be given to the least developed countries and the most disadvantaged sections of the population. The financial framework for the implementation of this new regulation for the period 2003 to 2006 is set at 351 million euros.

The European Union has also noted that, in spite of the fact that most of the key pharmaceuticals are off patent, few developing countries have sufficient capacity to manufacture them. Moreover, for the time being, available drugs are not well suited for developing countries, and malaria drugs are becoming less and less effective as a result of increased parasite resistance. We should therefore find new drugs appropriate to Africa's special needs and take into account local distribution problems and cold chain availability.

In that regard, we encourage interested parties, especially the pharmaceutical industry, to promote sustainable local production for national and regional

markets, aiming at the transfer of technology. For that reason, the European Union and its member States fully endorse the Doha Declaration on the Agreement on Trade-Related Aspects of Intellectual Property Rights and Public Health.

Many African countries are working to fight malaria, but they cannot do it alone. Like HIV/AIDS and tuberculosis, this disease requires a well coordinated, comprehensive and consistent response, which is beyond the financial and human resources of many developing countries. Because of their magnitude and transitional nature, poverty-related diseases require a systematic response from the international community. In that respect, we commend the proactive role played by the United Nations and the World Health Organization.

We believe public health is a public responsibility. Actions targeting the poverty-related disease must be carried out within the larger context of improving health care systems in developing countries and making those systems accessible to all. Improving health care is a precondition for and a key element of sustainable development. The European Union is committed to providing partner countries with assistance consistent with their own development plans, thus taking into account the overall objectives of improving the population's health and reducing poverty.

If the international community is capable of building a true global partnership with effective tools, and if developed and developing countries and the public and private sectors are able to work together towards this common goal, we strongly believe that malaria can be definitively rolled back throughout the world, as it has been in Europe.

Mr. Andjaba (Namibia): In his report contained in document A/58/136 the Secretary-General reveals that, in 2005 — when we review the implementation of the Millennium Development Goals — he, in close collaboration with the Director General of the World Health Organization (WHO), will present to the august Assembly a progress report on the targets of the Decade to Roll Back Malaria in Developing Countries, particularly in Africa.

The importance of that submission to the sixtieth session of the General Assembly is underlined by the fact that, in Africa, an increasing number of deaths is being caused by malaria. It is in that context that heads of State or Government of the African Union, meeting in July at the Second Ordinary Session of the Assembly in Maputo, Mozambique, reaffirmed their commitment, enshrined in the Abuja Declaration and the plan of action adopted for the Roll Back Malaria Initiative. It is for that reason that my delegation thanks the Secretary-General for his report and welcomes this debate.

Mr. Hoscheit (Luxembourg), Vice-President, took the Chair

Malaria continues to be a major public health problem in Namibia, and thus warrants special attention in terms of monitoring trends and formulating control strategies and prevention at all levels of the health care system and the community. According to health service statistics, an average of 450,000 malaria cases and 800 deaths from malaria are reported countrywide annually. This amounts to an incidence rate of 248 per 1,000 population and a mortality rate of 45 per 100,000 population per year. As one can expect, children under the age of five years and pregnant women are at higher risk of getting malaria and suffering its consequences. Our efforts to combat this disease are impeded by the problem of inadequate resources, compounded by the shortage of trained personnel.

In addressing this problem, in 1991 the Government launched a comprehensive programme to control malaria and other vector-borne diseases. Through this programme a number of activities have been undertaken to improve disease management, including the training of health workers, intensification of house spraying and improved reporting through the health information system.

While challenges remain, we have indeed made progress. At the national level, the Government has demonstrated its firm commitment to tackling the problem of malaria by establishing a national malaria control programme, appointing malaria control staff and allocating regular budgetary and logistical support.

The national policy and strategy on malaria was launched in 1995. That policy document describes the goals, malaria control strategies and activities at all levels of the health care system. It is also intended to inform both health workers and the general public about the role they can play in reducing malaria morbidity and mortality to the lowest possible level.

To date, 2000 health workers have been trained in malaria case management and microscopic diagnosis, which is believed to have markedly improved the quality of malaria diagnosis and treatment. It was possible to significantly improve the coverage and quality of spraying in the affected areas following a major input from the Government and our Roll Back Malaria partners.

To reduce the impact of malaria among the vulnerable population groups, about 20,000 children under the age of five years and pregnant women have been provided with insecticide-treated nets in selected highly affected areas. In order to mitigate the dreadful effects of malaria epidemics among affected communities, weekly malaria surveillance has been put in place. This has facilitated the detection of malaria epidemics at a relatively early stage. To facilitate the implementation of malaria control in the country, a five-year Roll Back Malaria strategic plan has been finalized.

On 22 September 2003, high-level meetings of the General Assembly were convened to mobilize efforts to address the HIV/AIDS pandemic. Today, we meet to discuss yet another killer disease, which in many African countries is claiming more lives than HIV/AIDS. This is a fact that needs to be emphasized as a rallying tool in the process of raising awareness and resource mobilization.

Malaria is preventable, treatable and curable, as stated clearly in the report of the Secretary-General. One can die from malaria only if and when not treated promptly and effectively. The challenge, then, is to assist the affected countries. The use of anti-malaria tools is widespread and common. Unlike the case of the AIDS virus, many African countries have access to anti-malarial drugs. However, the growing resistance to current drugs compounds the problem. This is a challenge that needs to be addressed now, together with the question of affordability. We can achieve the Abuja target of 60 per cent coverage only when the new and improved drugs are affordable.

Efforts at the community level are crucial, and, as pointed out in the Secretary-General's report, home treatment supported by public information and pre-packaging can assist substantially in reducing child mortality. Malaria affects the areas surrounding affected communities and their efforts towards sustainable development. In this context, research on environmental management for malaria control in development should be supported.

While we continue to support ongoing research for a vaccine, we call on the international community to support the efforts of the affected countries by providing the tools, which are already available. In that connection, we welcome and further encourage the transfer of technology for the production of insecticide-treated nets and efforts to increase access to anti-malaria medicines. We view the transfer of this new technology as a firm beginning in effectively tackling malaria in the affected African countries. Making generous contributions to the Global Fund to Fight AIDS, Tuberculosis and Malaria is one effective way of assisting the affected countries. We commend the efforts of the World Health Organization (WHO), the United Nations Children's Fund (UNICEF) and other Roll Back Malaria partners in mobilizing the business community to take part in the global campaign against malaria.

We welcome the increase in resources mobilized for the Roll Back Malaria campaign, but more resources are needed to complement those of the affected countries.

In conclusion, the report before us contains recommendations to the affected countries, the international community as a whole, and in particular the private sector, in the fight against malaria. We urge the implementation of those recommendations, so as to assist African countries in implementing the Abuja Declaration.

Mr. Aboul Gheit (Egypt) (*spoke in Arabic*): The General Assembly today is considering an item of great significance — the Decade to Roll Back Malaria in Developing Countries.

Malaria's socio-economic impact is not limited to the African continent. Studies have shown that malaria is endemic in more than 100 countries, whose populations represent 40 per cent of the total population of the world. Studies have also shown that 90 per cent of those infected by the disease — whose number ranges from 300 million to 500 million people — are Africans.

Regrettably, children represent the majority of the 3 million people who die from the disease every year. This is particularly regrettable given not only the high rate of infection and death among adults and children,

but also in view of the painful scientific fact that malaria is curable if diagnosed and treated early. For that reason, we must focus on the humanitarian, not the commercial, aspect of dealing with this disease.

Reports indicate that the African continent requires nearly $1 billion a year to combat malaria effectively. Reports indicate also that the financing available is only about a quarter of what is needed. My delegation therefore agrees with the statement in the report of the Secretary-General that the level of international funding to combat malaria is inadequate. We support his call to bolster governmental expenditures in African countries with greater and more comprehensive international funding.

If malaria, as facts have shown, is both a cause and a consequence of poverty, we cannot expect developing countries to succeed in overcoming the health problems they face without a tangible increase in development assistance, including the alleviation of the debt burden of those countries, to redirect more resources to health services, to promote prevention and treatment programmes, and to improve general health-care services in general.

Every 30 seconds a child dies of malaria. I therefore call on all Governments, in particular the community of donor States, to make some simple calculations: how many children will have died during the delivery of this statement? How many children will die during the discussion of this item? How many children must die before the international community moves to eradicate this disease?

Malaria is not considered incurable. On the contrary, there are means of treatment and prevention. All that is required would be a reasonable percentage of what the world spends daily on armaments and on the building of vast military arsenals.

Ms. Bahemuka (Kenya): My delegation commends the Secretary-General and the Secretariat for the documentation provided for this agenda item.

Malaria is the second most deadly disease in Africa, after the HIV/AIDS pandemic. Recognizing the magnitude of the problem, the General Assembly, at its fifty-first session, appealed to the international community and to non-governmental organizations to allocate substantial resources — especially through the Global Fund to Fight AIDS, Tuberculosis and Malaria — for developing countries, particularly in Africa. The goal was to enable African countries fully to implement the plan of action adopted at Abuja for the Roll Back Malaria initiative.

We are grateful indeed to the World Health Organization and to the United Nations Children's Fund (UNICEF) for their joint efforts to compile a report on malaria in Africa, which was released on Africa Malaria Day, observed on 25 April last in a coordinated launch in Nairobi; Washington, D.C.; and London. We also appreciate the efforts of the World Bank and of other partners in resource mobilization and in financing the campaign against malaria.

At the national level, Kenya recognizes that good health is a prerequisite for the socio-economic development of any country. We are a signatory to the Abuja Declaration on Roll Back Malaria. We have responded to the Abuja Declaration through the removal of taxes and tariffs associated with insecticide-treated net products. A National Malaria Strategy has been put in place and focuses on improving malaria case management at all levels of the health sector; reducing the risks of malaria during pregnancy; increasing the use of insecticide-treated nets and other vector-control technologies; and responding to malaria epidemics.

The National Malaria Control Council (NMCC) has since been reconstructed to become the Inter-Agency Coordinating Committee. That Committee will be a more effective political and financial management tool for soliciting and directing investment aimed at rolling back malaria in Kenya. The objective is to reduce morbidity and mortality caused by malaria by 30 per cent among Kenya's population by the year 2006 and to sustain that improved level of control through 2010.

Significant resources to Kenya districts are now being mobilized though health sector reform. That reform will provide the framework and financing mechanisms for improved district-led support for curative and preventive services. The Division of Malaria Control will support planning of district-led strategies in concert with the national malaria strategy.

In order to enhance those efforts, the Government of Kenya, in collaboration with other stakeholders, intends to strengthen preventive and promotive health care through malaria control, an expanded immunization programme, integrated control of childhood illness and the prevention of

environmentally related communicable diseases. We are also trying to strengthen curative health services so as to manage the top 10 killer diseases through the provision of health personnel, drugs and equipment. In addition, Kenya would like to expand health insurance coverage and access for all its citizens.

National efforts in the fight against malaria require international support through funding, capacity-building and equipment. Kenya has drawn up a strategic plan that has enabled us to benefit from the Global Fund. Such funds will be utilized to strengthen malaria early-warning systems and studies in order to improve detection of outbreaks and response to them.

In conclusion, we must work together with the international community to strengthen national interventions in the fight against the major killer diseases in developing countries. It is very urgent that our development partners honour their commitments by contributing to the Global Fund to fight the three maladies that continue to afflict developing countries.

Mr. Menan (Togo) (*spoke in French*): Last year, when the General Assembly was considering the item that is before it today, the Togolese delegation strongly urged the international community to make every effort to attain the objectives set out in the framework of the Decade to Roll Back Malaria in Developing Countries, particularly in Africa. From that perspective, and in keeping with the views that we initially expressed, Togo believes that the Decade's objectives should be a genuine challenge for countries where malaria is endemic and for the international community to meet at all costs.

It is paradoxical that malaria, which everyone agrees is a disease that can be cheaply controlled and cured, remains one of the primary causes of death in African countries, as indicated by statistics set out in the report on malaria in Africa in 2003, published jointly by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF). According to those statistics, more than 3,000 children in Africa die from the disease every day.

The Secretary-General addresses that state of affairs in his report on implementation of the Millennium Declaration (A/58/323), when he notes with bitterness that, despite the progress achieved with regard to children's health in developing countries in the 1990s, nearly 11 million children die each year before their fifth birthday, primarily from diseases that can be easily prevented or treated, malaria among them.

However, it is encouraging to note that, because of the proclamation in 2001 of the Decade to Roll Back Malaria and the launching of the Roll Back Malaria initiative three years earlier by WHO, UNICEF, the United Nations Development Programme (UNDP) and the World Bank, preventing and fighting the disease are again becoming top priorities at the national and international levels. That is also made clear in the report of the Secretary-General (A/58/136), submitted to the General Assembly in keeping with the recommendations contained in resolution 57/294, which the Assembly adopted at its last session. As the report recalls, administering medicines and using insecticide-treated mosquito nets are still the only effective ways to fight the disease.

However, access to treated mosquito nets remains relatively limited in Africa — despite notable recent efforts to bring mosquito nets into general use — because of their high cost, which is an obstacle to their widespread use. That is why Togo commends the Secretary-General for his proposal to persuade companies that extract petroleum products on the African continent to contribute to the Roll Back Malaria initiative in Africa by providing at greatly reduced cost the polymers used in manufacturing mosquito nets. We fervently hope to see the General Assembly endorse that recommendation as well as the others contained in the aforementioned report.

To attest to Togo's commitment to pursuing efforts aimed at promoting the health of the Togolese people, despite the financial difficulties the country has faced for more than 10 years, since the suspension of the aid that it had received from its main development partners, the head of the Togolese State announced to UNICEF authorities in June the Togolese Government's decision to lower customs tariffs on insecticide-treated mosquito nets.

Here, we should stress that, despite the scarcity of their resources and the problems of every kind that they face, African countries are attempting to various degrees to initiate health programmes that place priority on fighting malaria. Those countries are mindful of the need to increase national investments in the health sector and to improve its management, particularly through greater integration of anti-malaria activities into their development efforts in the health

sector, in conformity with their commitments under the Declaration and Plan of Action on the Roll Back Malaria in Africa initiative, adopted in Abuja, Nigeria, in 2000. However, they cannot succeed in that endeavour unless they receive adequate assistance from the international community, as the report of the Secretary-General opportunely recalls.

With regard to pharmaceutical products, according to a study by the Pasteur Institute in France, researchers in areas where malaria is endemic have not been able to develop a viable remedy for all forms of the parasites that are responsible for the disease. The study also states that one of the major difficulties confronting researchers is fighting the great ability of mosquitoes — vectors of the parasite — to adapt to treatments and that the parasites deposited by mosquitoes into the human organism are resistant to medicines, whereas mosquitoes themselves develop resistance to insecticides.

However, it is reassuring that research continues to make appreciable progress, as attested by a British pharmaceutical group's recent launching of a new product, called Lapdap, designed to fight the most deadly form of malaria, which is the most widespread form in sub-Saharan Africa. Yet it seems that, if the political will prevails and if pharmaceutical companies are not too much bent on the frenetic quest for high profits, the current efforts could sooner or later be successful, both in discovering a treatment for all types of the parasites that cause the disease and in developing a vaccine.

In this campaign against malaria, Togo, like other African States, very much hopes that the international community will not cease to support seriously affected countries so that lives can continue to be saved and so that the Decade to Roll Back Malaria will be able to reverse the trend of the disease.

In that way, the international community would respond to one of the specific needs of Africa: promoting the health and well-being of our peoples. And above all, it could help to spare families in distant Africa the tragic, wrenching scenes, often marked by the death of a child simply because the parents did not have enough money — which in many cases would be less than $1 — to buy the necessary drugs.

In conclusion, I wish to reiterate the gratitude of my Government to the United Nations agencies, particularly the World Health Organization and the United Nations Children's Fund, as well as to the various foundations for their positive contribution in the struggle to combat malaria. The Government of Togo urges donors to provide further support for the Global Fund to Fight AIDS, Tuberculosis and Malaria.

Mr. Tekle (Eritrea): The Eritrean delegation takes this opportunity to thank the Secretary-General for his informative report (A/58/136) on agenda item 51, entitled "2001-2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa".

My delegation participates in this debate anticipating that the review of the first three years of the 10-year programme will enable us to identify the obstacles that confronted us and the various means by which we can get rid of, or attempt to get rid of, those obstacles. It hopes that this exchange of views will enable us, if necessary, to readjust our programmes and to reorganize our priorities and approaches.

Unlike HIV/AIDS, malaria is not a new pestilence. Humanity has known and lived with it for millennia. Although, fortunately, it has been completely eradicated in most parts of the world for at least several decades, in some unfortunate areas it continues to kill or debilitate large sections of the population. Even worse, it has recurred in areas from which it had successfully been eradicated. Among the worst hit is the Horn of Africa, even though previously it had made progress, owing to several national eradication programmes.

The statistical data are grim. In most of the countries of the Horn of Africa, including Eritrea, almost 30 per cent of the population is victim to malaria. Worse, almost 70 per cent of the population lives in malaria-endemic areas. In Eritrea, the death rate among children hospitalized with malaria is about 7.4 per cent.

The causes of the continued existence of malaria may differ from area to area. In the Horn of Africa, the primary reason for this calamity has been war — never-ending war. Malaria has had at least as much impact as HIV/AIDS on our economies, and in some cases it has had a more negative one, not only because of its debilitating effects on a much greater workforce, particularly among the peasantry, but also because the malaria-endemic areas are largely unavailable for cultivation. Indeed, in Eritrea malaria is the greater threat.

Thus, malaria is as much an economic threat as it is a health problem and has influenced socio-economic development programming in African countries. It is for this reason that the Eritrean Government has, since 1991, addressed the problem with the seriousness it deserves, has given it high priority and is determined to wage an unremitting struggle against the plague.

The Government of Eritrea has, inter alia, taken the following concrete measures in its war against malaria.

First, in addition to earlier efforts, the Ministry of Health inaugurated a five-year malaria reduction programme for the period 2001 to 2005. The major goal of this holistic programme adopted by the Ministry was to significantly control the further spread of the disease while, at the same time, preventing more infection among vulnerable groups by the strengthening of epidemiological surveillance. Its ambition was to minimize the effects of malaria on the capacities of the population by reducing mortality, morbidity and the incidence of malaria by 80 per cent, and to reduce malaria epidemics by 90 per cent by the end of 2005. The programme is largely on course.

Second, it established the national malaria control programme, which is responsible for the formulation of malaria control policies, plans and guidelines; coordination and control of programmes; monitoring and evaluation of programme activities; and coordination of technical assistance and research.

Third, it has trained village health agents and assigned them to provide malaria control services at the grass-roots level. These agents diagnose and treat simple cases of malaria, disseminate awareness information, mobilize communities for environmental management and identify vector-breeding sites close to communities. This is made possible through village meetings and periodic seminars given by the village agents, and through the coordination of community participation in weekly environmental management activities, including the draining and filling of breeding sites.

Fourth, through its regional and local offices, the Government provides insecticide-impregnated bed nets to the needy population. It is hoped that, by the end of 2005, every household will have at least two such bednets.

Fifth, it employs combination therapy for the treatment of the disease at all levels and has evolved a detailed treatment regimen known as the Eritrean standard treatment guidelines.

Sixth, it carries out indoor house-spraying activities, albeit selectively, on the basis of a previous history of malaria in a given area and/or evidence of a sudden increase in other areas. This may, in some cases, include total coverage of villages in affected areas.

Seventh, it routinely conducts tests of insecticide spraying to determine the susceptibility or resistance of the vector to insecticides selected for vector control.

Eighth, it has developed and widely disseminated educational and awareness material in several Eritrean languages, including Arabic, Tigre and Tigrigna, and has effectively used radio and television programmes, as well as village meetings, to that end.

Ninth, the Malaria Control Programme has also established a close collaborative relationship with relevant Eritrean ministries including, in particular, the Ministries of Agriculture and Environment, and Land and Water, as well as the Meteorological Department, to ensure appropriate surveillance and to develop sensitive forecasting methods.

In its effort to control the scourge, the Government of Eritrea has been cooperating with, and has received assistance from the United States Agency for International Development, for its entomological research programme; an Italian cooperation project; the World Health Organization (WHO) for the Roll Back Malaria programme; the United Nations Children's Fund (UNICEF) for the protection of children and those countries which are supporting the HAMSET Disease Control Project, which deals with HIV/AIDS, malaria, sexually transmitted diseases and tuberculosis.

However, Eritrea recognizes that if the campaign against malaria is to succeed, it must transcend national boundaries and benefit from the creation of effective cooperative regional mechanisms, strategies and programmes. These are not yet in place.

Needless to say, the Eritrean Government will steadfastly pursue the goals it has set for itself in its five-year plan, which ends in 2005. The mission is great and the challenges and obstacles are many. Yet, they would not be insurmountable if there were to be peace with justice, peace based on the rule of law,

peace respecting good neighbourliness and peace anchored in good faith and trust. Unfortunately, the chances of achieving these ideals, too, seems to be remote.

Mr. Rajalingam (Fiji): Fiji commends the Secretary-General for the excellent report contained in document A/58/136, entitled "2001-2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa", and supports its recommendations.

The HIV/AIDS pandemic has touched all corners of the globe. Its effects have devastated families, economies and Governments. Whole generations may be lost before we totally recover. Likewise, development strides gained in recent decades have been rolled back. Less mentioned but no less intense in its devastation is malaria.

Malaria continues to plague parts of our region. Although our statistics seem relatively less alarming than other regions, they have attracted global attention and resources. We do not believe this statistical indicator to be cause for complacency in taking preventative measures to ensure it does not reach pandemic proportions. Nor indeed should a complacent attitude cause malaria to revisit those countries in the region, such as Fiji, that have successfully rid its citizens of this disease. Sadly, tuberculosis is one such ravaging disease that has returned.

We acknowledge the intensive efforts of the World Health Organization (WHO) in controlling this disease as well as member Governments' initiatives to fight the scourge. The WHO report contained in document A/58/136 is meticulous in its detail and statistics. We are encouraged to see that the plan of action to roll back malaria is global in perspective and embraces all countries and regions, irrespective of size or extent of the endemic malaria. In our region, we feel confident that the malaria project allocation of the Global Fund to fight AIDS, Tuberculosis and Malaria will make a significant difference towards reaching the objectives of the global programme.

Developing countries are particularly vulnerable to the onset of any epidemic. They lack the industrial base for pharmaceutical production to meet demands and lack readily available financial resources to buy the necessary pharmaceutical products from manufacturers. Typically, when a disease reaches epidemic proportions, it is also accompanied by opportunistic, often deadly, companion infections or diseases which are equally potent in impact.

The WHO report has allowed us to reflect on the grim picture of the malaria pandemic in Africa. Alongside the plaguing effects of HIV/AIDS in Africa, clearly the eradication, or at least alleviation of such pandemics depends on development. The Global Fund to fight AIDS, Tuberculosis and Malaria is only one avenue — groundbreaking as it is — that is making it possible for African countries to access funds for malarial control commensurate with the severity of their needs.

Clearly, the implementation of the New Partnership for Africa's Development could strengthen this fight. Other financing alternatives, such as debt swaps, form a sound basis for consideration by the United Nations and WHO, in partnership with the Bretton Woods institutions. The private sector and industry need to nurture and contribute to this programme.

The contributions of non-governmental organizations are also acknowledged. Assistance provided by non-governmental organizations such as the Sovereign Military Order of Malta, in setting up sleeping sickness clinics in the Southern Sudanese town of Yei, is noteworthy.

Many other contagious and preventable diseases are affecting developing countries. In Fiji, filariasis, dengue, leprosy and diabetes have ravaging impacts and the incidence of tuberculosis is increasing. Care, treatment and upstream prevention need to be extensively addressed by WHO and other stakeholders.

Mr. Olhaye (Djibouti): With the advent of information technology and instant communications, our world appears to have gone from a state of information awareness and knowledge, to one of information overload and virtual ignorance. Consequently, many concerns deserving the attention of the international community are driven from public view in the competition for attention being waged by a vast number of issues. The global fight against terrorism in all its various forms, the recent wars in Asia, particularly in Afghanistan and Iraq, and those plaguing the continent of Africa, as well as the spreading scourge of the HIV/AIDS crisis, are but a few of the more pressing issues which have combined to push malaria below the radar of public concern. Not

surprisingly therefore, the disease remains a dangerous threat to millions of people.

The effort to combat malaria figures prominently in the Millennium Development Goals, which seek to halt and reverse the incidence of this disease and other major diseases by 2015.

The General Assembly, by its resolution 57/294, declared 2001-2010 as the "Decade to Roll Back Malaria in Developing Countries, Particularly in Africa". The resolution called for support of the Secretary General's recommendations, contained in document A/57/123. What we are seeking in this and other relevant meetings is an update on the status of the implementation of the recommendations in the General Assembly resolution.

Implementing the recommendations would, of course, take place in a real-world situation, and here the actual facts are startling. The latest report of the Secretary-General on implementation of the Millennium Declaration highlights disturbing statistics relating particularly to sub-Saharan Africa. Clearly, Africa represents the major focus of the malaria crisis.

To its credit, Africa has recognized that fact. The Abuja Declaration of 2000 set targets and called on African States and their partners to allocate new resources — at least $1 billion per year — for combating the disease. The Africa malaria report of 2003 was released on 25 April 2003, Africa Malaria Day, and took stock of the malaria situation.

Obviously, funds set aside for malaria must increase. A meagre $200 million was spent worldwide in 2002, as against the $1 billion recommended for Africa alone. But perhaps more critical than the sheer provision of funds is the need for Governments in Africa to be engaged and to enhance the capacity of manpower. The international community must transfer new technology to developing countries, particularly for the production of long-lasting insecticide nets, and ways must be found to increase the availability of combination drugs for multi-drug-resistant malaria.

As with HIV/AIDS, the roles of both prevention and treatment loom large for malaria. It appears that thousands of lives can be saved, particularly children, simply through the effective use of insecticide-treated bed nets. Usage is restricted, however, due to the high cost of those nets. Those costs could be lowered by a reduction in the high tariffs and taxes levied on them within Africa. With the resulting lower prices, more people would be able to afford the nets, which would stimulate market potential for commercial production. The result would be a low cost but highly effective method for reducing the incidence of malaria among users.

The report of the Secretary-General is quite positive about the potential of long-lasting insecticidal nets, which are factory pre-treated and require no further treatment during a projected four to five years of usage. While the nets are considered to be a major breakthrough in the prevention of malaria, global production is inadequate. The report recommends that an additional five to ten factories be constructed in Africa at strategic locations in the next few years. Even more promising, the long-lasting insecticide nets are made from polymers derived from petroleum. Oil companies in Africa could therefore be encouraged to make those polymers available either free or at a low cost.

The importance of long-lasting insecticide nets rises considerably when we examine the growing immunity and resistance of malaria parasites, particularly to the major malaria drug, chloroquine. Developing new treatments are therefore critical. The World Health Organization recommends the use of artemisinin-based combination therapy (ACT), which appears very promising aside from its relatively high cost and limited operational experience in Africa. One pharmaceutical company is said to be making ACT available at cost. Others must follow, along with donor Governments, to explore strategies for making ACT available at the lowest cost.

For many reasons, people in sub-Saharan Africa cover the cost of malaria prevention and treatment out of their own pockets. More important though, is the fact that, given the inevitably low level of knowledge, awareness and information — all tied to poor communications and public education — there is little guidance on quality, safety or appropriateness. Public education is critical.

Perhaps the essential fact to note is the conclusion of the Secretary General's report that malaria is treatable, preventable and curable. That can be seen by the zero- to low-level incidence in many areas of the world where malaria has been eradicated. Major advances are possible in many countries simply by utilizing existing tools. Developing new tools, such

as a vaccine, deserves continued support, although they may be years away. While progress is being made, measured against our targets and recommendations, it is too slow. The creation of the Global Fund to Fight AIDS, Tuberculosis and Malaria is a major breakthrough and holds the potential of access to funds for malaria control commensurate with needs. Such funds would be well spent given that macro-economic analysis indicates that the net return on investment in malaria control is substantial and far exceeds the initial investment in terms of improved economic performance and reduced poverty.

Finally, it would be a travesty to discuss the prevention and treatment of malaria in Africa without noting the remarkable private efforts of the Bill and Melinda Gates Foundation. While it is true that the Foundation is the most highly funded in the world, what stands out is not the size of the largesse of those individuals but the intensity of their personal focus and concern for the lives and well-being of the global poor. As one American newspaper notes, the Gates have placed huge bets on big, difficult scientific problems. They have committed more than $126 million to finding an AIDS vaccine and have put some $150 million into the development of a malaria drug. Recently, they personally trekked to a remote clinic in Mozambique to announce the largest grant in history for malaria research, using the occasion to highlight malaria's toll of more than 1 million children dead each year, mostly in Africa. They recently awarded a $28 million grant for a huge series of tests for a technique which, if successful, could cut malaria deaths by half in Africa.

Understandably, much of the world shares with the Gates a lack of understanding about why other people and their Governments do not share their sense of urgency. We hope more Governments and organizations will join this noble cause to eradicate one of humanity's scourges from the face of the earth.

Mr. Zenna (Ethiopia): At the outset, I would like to extend my sincere appreciation and thanks to the Secretary-General for his comprehensive report entitled "2001-2010: Decade to Roll Back Malaria in Developing Countries, Particularly in Africa" (A/58/136 and Corr.1). My delegation fully concurs with the recommendations contained therein.

It goes without saying that Africa, the most marginalized region in the world, suffers from various social and economic deprivations which claim the lives of millions of people each year. Also, it has always been the case that dismal economic growth, hunger, famine and disease are customary terms to describe the misery of this continent.

When one speaks of diseases in Africa, it is hardly possible to fail to mention malaria. Although malaria is a global health problem, it remains the disease of the impoverished, mostly in sub-Saharan Africa. The major changes in the eco-epidemiological system that frequently occur in different parts of the continent, the premature termination or unplanned interruption of antimalarial measures in epidemic-prone areas and population movements due to the requirements of seasonal workers, refugees or migration for different reasons are the major causes of the outbreak of this epidemic in the region.

Ethiopia is no different from other African countries that are severely affected by the disease. The epidemic has proved to be a major public health and economic problem in Ethiopia, in which 40 million people are at risk of the disease, with approximately 4 to 5 million cases reported annually. The disease is on the top of the list of the major killer diseases in the country and accounts for a significant number of outpatients. Recurring large-scale drought and subsequent malnutrition seem to create a conducive environment for the onset and spread of the epidemic in various regions of the country. According to a high-level delegation of the World Health Organization that recently visited the drought-affected areas in Ethiopia, the onset of the malaria epidemic will increase during the next couple of months. Furthermore, according to the same report, if the proper measures are not taken, tens of thousands of people will certainly die of the epidemic.

In an effort to combat the spread of this epidemic, the Government, to the best of its resource capability, is trying to take the necessary measures. In addition to having signed on to the global campaign to fight malaria, it has launched its own five-year country strategic plan for malaria control. In collaboration with international organizations such as the World Health Organization, UNICEF and others, efforts are under way to target the most vulnerable section of the population, namely pregnant women and children in rural areas, and launch a wider campaign to fight the spread of the epidemic. The Secretary-General's report states that "the bottlenecks that impede effective

resource flows for malaria have now been identified and malaria control is back on the Government agenda" (*A/58/136, para 21*).

Apart from what I briefly touched on at the beginning of my speech about the difficulties that our continent of Africa is facing, the pain and sacrifice in overcoming the horrific situation in the region is becoming unbearable. Being aware of this menace, the international community, at the dawn of the new millennium, has taken the initiative of alleviating the major challenges that impede the growth of the region by setting various development goals. To that end, diseases that are pervading the African region have been recognized as barriers that hamper prosperity. Accordingly, the international community has stressed the importance of solidarity in tackling the problem. That commitment to mitigate the effects of the epidemic is embodied in the Millennium Development Goals. The establishment of the Global Fund to Fight AIDS, Tuberculosis and Malaria is an important and encouraging endeavour by the international community to support poor countries in their effort to make progress in malaria control. Ethiopia, one of the beneficiaries of the Global Fund, calls on the international community, especially partners among the developed countries, to increase the flow of financial support to the Fund. We believe that such cooperation is in line with the political commitment of our partners to help realize the dream of stopping the global spread of malaria.

The Acting President (*spoke in French*): We have heard the last speaker on this item. The General Assembly has thus concluded this stage of its consideration of agenda item 51.

Agenda item 160

Global road safety crisis

The report of the Secretary-General (A/58/228)

Draft resolution A/58/L.3

The Acting President (*spoke in French*): I now call on the representative of Oman to introduce draft resolution A/58/L.3.

Mr. Al-Hinai (Oman): The General Assembly is for the very first time discussing another rapidly growing epidemic — that of globa road l traffic deaths and injuries. The Secretary-General's report (A/58/228) contains very alarming statistics. It was just over a hundred years ago that the first road traffic death occurred. Today, approximately 3,000 people worldwide are killed daily as a result of road crashes, while thousands more are injured, some never again to lead productive lives. It is also alarming that this burden falls disproportionately on developing countries, where roads are becoming more congested with vehicles and people every day.

But, let us not lose hope. The battle is not lost. We can do something about it. I am optimistic that we can get this plague under control. I am optimistic for two reasons: first, because we have an unprecedented understanding of the dynamics of road crashes and, secondly, because we have a broad range of effective interventions to prevent them.

Let me first say a word about the predicted rapid rate of increase in road deaths in the developing world. This is a man-made plague, and we understand very well why the deaths and injuries have been increasing in low- and middle-income countries. What makes this plague different from AIDS and the Severe Acute Respiratory Syndrome (SARS) is that we can both understand and control this problem.

In developing countries, the victims of road crashes are the most vulnerable people, the vulnerable road users. Most of the victims of road traffic injuries and deaths are pedestrians, a contrast to the situation in developed countries, where the victims are mostly the drivers and passengers of automobiles. Owing to the stricter manufacturing standards imposed on car manufacturers in the developed countries, those passengers and drivers are actually very well protected by the steel frame of the vehicles in which they are riding.

In developing countries, pedestrians and bicyclists are the most vulnerable road users; they have no protection. Mothers carrying babies walk between rapidly moving buses, cars and trucks, while traffic signs, which are rare, are often ignored even when present.

Cars in developing countries are much more likely to kill a person than cars in the developed countries. In some developing countries, cars are up to 200 times more lethal than in developed countries. Further, we also know that car manufacturers plan to increase production and exports to the developing

world. As the number of vehicles increase, so will the number of deaths and injuries — unless we take action.

From this, we can understand the rate of growth of this epidemic. It is a scientific fact that we live in a world that is based on cause and effect. When we understand the causes, we can control the effects. In this case, we understand exactly what is behind the increasing rates of death, and that gives us an advantage in addressing the problem. Hence, my first reason for optimism.

The second reason for my optimism is the new way of thinking about road safety. The historical view had been that the way to prevent traffic deaths was simply to warn drivers and pedestrians to be careful. We thought that prevention meant getting the word out to people and educating them about safe procedures. In that view, education was really the only tool we had for prevention. We now realize that there are many other actions we can take, and that responsibility rests not only with individuals, but it should be a responsibility shared across many sectors and levels in our countries.

A more advanced approach to road safety has been developed, one that recognizes that the driver, the vehicle and infrastructure are three components of a dynamic system. That approach recognizes that there are many things we can do to prevent road crashes. A systems-based approach seeks to identify all the sources of error and design that contribute to road crashes, and then tries to mitigate the consequences. That systems-based approach suggests that, first, we can look at roadways and make changes. For example, pedestrians and people in non-motorized vehicles are not separated from fast-moving traffic. Many roads do not have barriers, or even white lines down the middle, to separate lanes of traffic. Communities should have roadways that circle villages or towns, rather than just pass right through them. Blind spots that limit visibility can be eliminated, and rumble strips can be added to roads to reduce speed.

Next, we can make design changes in vehicles. Many vehicles may be very old and lacking safety features such as collapsible steering columns and engine blocks that absorb impacts by crushing like an accordion. Those features — and others such as seatbelts, child-safety seats, airbags and lights to increase visibility — can be added to modifications to the front ends of vehicles to minimize injury to pedestrians.

We can also look at human behaviour and make changes. Laws can be written and enforced that severely penalize drivers for speeding or driving under the influence of drugs or alcohol. Laws and their enforcement can be supported, starting at the top levels of Governments and down through community levels, and taught at an early age in school.

On behalf of its sponsors — Algeria, Australia, Azerbaijan, Bahrain, China, Cuba, Ecuador, Grenada, Iran, Kuwait, Lebanon, Malaysia, Pakistan, Panama, Qatar, Saudi Arabia, South Africa, Sudan, Switzerland, Syria, Tunisia, the United Arab Emirates, the United States, Yemen and Oman — I now have the honour to introduce the draft resolution on the global road safety crisis, which is contained in document A/58/L.3. Since the issuance of the draft resolution, the following additional countries have joined the list of sponsors: Armenia, Argentina, Belgium, Costa Rica, the Dominican Republic, France, Greece, Iceland, Italy, Kenya, Nauru, Portugal, the Republic of Moldova, the Russian Federation, Singapore and Trinidad and Tobago.

In order to raise greater awareness of the magnitude of the road-traffic injury problem, the sponsors are calling for a plenary meeting of the General Assembly to be held on 14 April 2004 to bring together Government representatives and experts to discuss this issue. That meeting will be held in conjunction with World Health Day, which will be observed on the 7 April 2004, and the World Health Organization's launching on that day of its *World Report on Road Traffic Injury Prevention*.

In conjunction with that plenary meeting, the sponsors are requesting that a meeting be organized to allow the private sector, relevant non-governmental organizations, members of civil society and other interested parties to exchange information on best practices regarding road safety. The sponsors are also calling for the Economic and Social Council to facilitate the exchange of information on best practices regarding road safety and to make recommendations for road traffic injury control. It is expected that the outcome of the exchange of information between the Economic and Social Council's regional commissions and other relevant organizations and agencies of the United Nations system and the exchange of views that will take place at the 14 April 2004 meeting will form the basis of the report of the Secretary-General to be

submitted to the General Assembly at its sixtieth session.

I would like to express my deep gratitude to the representatives who participated in the many informal meetings we held and who offered constructive suggestions, amendments and advice.

I am honoured to recommend draft resolution A/58/L.3 for adoption by the General Assembly.

In conclusion, catastrophic road crashes are not a necessary product of development. Motorized vehicles represent positive progress for people and allow us to develop economically and as a society. We can ensure that, as our nations move people and goods to foster development and commerce, we do it safely. For my delegation, this represents an extraordinary opportunity for all of us to help reach that goal — an opportunity to make a difference in the lives of men, women and children around the world.

Mr. Suhaili (Malaysia): At the outset, my delegation would like to commend the delegation of Oman for its initiative in raising this important question as an agenda item of the General Assembly. We extend our sincere appreciation in particular to Ambassador Fuad Al-Hinai, Permanent Representative of the Sultanate Oman to the United Nations, for his untiring efforts and dedication in pursuing this matter. My delegation would also like to acknowledge the role and contributions of Member States and relevant agencies of the United Nations, non-governmental organizations and members of civil society to this initiative. We welcome the publication of the inaugural report of the Secretary-General on the global road safety crisis (A/58/228). We support the recommendations contained in the report, most of which have been, and are being, implemented by Malaysia.

According to statistics compiled by the World Health Organization (WHO), road traffic accidents worldwide have resulted in the deaths of over 1 million people and caused injury and disability to more than 10 million others on an annual basis. In 2000 road traffic accidents constituted the ninth leading cause of death. Such a horrific situation affects both developed and developing countries. However, 88 per cent of those deaths and injuries have occurred in developing countries. Furthermore, it is estimated that at least 6 million people will die and 60 million others will be injured or disabled in developing countries over the next 10 years as a result of road traffic accidents. Those figures warrant serious and urgent attention and a concerted global effort to tackle and reverse such a largely preventable cause of death and injury.

In Malaysia over 200,000 cases of road traffic accidents were reported in 2002 alone. Those cases resulted in the loss of nearly 6,000 Malaysian lives. The fatality rate due to these accidents in 2002 stood at a rate of 4.9 deaths per 10,000 registered vehicles. Consequently, total losses to the gross national product arising from that situation amounted to $1.42 billion.

The Government of Malaysia has maintained a long-standing and abiding commitment to address this problem, in the interest of saving lives and managing valuable resources required for development. The National Road Safety Council of Malaysia was established in 1962. Through the National Council, the Government of Malaysia continues to undertake various efforts to reduce the number of road traffic accidents and to promote road traffic safety consciousness among road users and the general public. The Council has set a target of reducing fatalities to a rate of 4 per 10,000 registered vehicles by 2010. In pursuing that objective, in 1997 Malaysia launched a nationwide road traffic safety campaign and awareness programme premised on the concept of the "three Es", which stands for education, enforcement and engineering. That campaign has been quite effective in reducing the number of road accident fatalities to 5,886 deaths in 2002. Malaysia will continue to make serious efforts to further reduce that figure.

Aside from efforts at the national level, Malaysia is an active participant at the regional and international levels in formulating strategies for the development and sustainability of road infrastructure. Among other things, those strategies are aimed at reducing road traffic accidents by constructing better, safer and more road user-friendly infrastructure and by promoting and ensuring efficient maintenance of road infrastructure. Malaysia is involved in the World Bank Group's Global Road Safety Partnership, the World Road Association, the Land Transport and Safety Committee of the Association of South-East Asian Nations (ASEAN), the Road Engineering Association of Asia and Australasia and ASEAN's Sub-working Group on Road Transport and Road Safety. We believe that the consultations in, and experiences gained through, those and other forums have, and will continue to be, useful in the collective efforts to address this issue at the

regional and international levels. That would also be in accordance with one of the conclusions contained in the report of the Secretary-General submitted under this item.

The statistics on deaths, injuries and disabilities caused by road traffic accidents must be a cause of grave concern to us. They are a burden on our human conscience and a subject of concern because of their destructive and multidimensional impact on the economic and social well-being of our societies. The loss of even one human life and the disabilities caused by road traffic accidents have a rippling negative effect on individuals, families and societies. It is equally heart-rending for anyone to learn of the loss of dear friends and family members — be it a teenager involved in an illegal motorcycle race on the streets of Kuala Lumpur, a family returning from vacation somewhere in Greece or a busload of passengers killed in a ravine somewhere in Pakistan. Initially, such accidents immediately and drastically affect family and social units, both emotionally and psychologically. Subsequently they have a gradual effect on the larger community and on the country as a whole, owing to the human, economic and social losses involved.

According to studies conducted by the World Health Organization, Harvard University and the World Bank, it is anticipated that by 2020, if left unchecked, road traffic accidents will advance to become the second leading cause of death and disability in the world. The inclusion of this item in the agenda of the General Assembly is very timely, especially given that road safety will be the theme and focus of World Health Day in 2004. Malaysia supports the adoption of that theme to mark the start of a global campaign for road traffic safety. We also support the draft resolution before the Assembly on this item.

Road traffic accidents have affected, and continue to affect, each and every one of us in one way or another. The United Nations has an important role to play in leading international efforts to address this highly preventable but deadly public safety problem. Rest assured that, within our means and capacity, Malaysia stands committed to make its contribution in that regard.

Mr. Zhang Yishan (China) (*spoke in Chinese*): The Chinese delegation supports the consideration by the current session of the General Assembly of the agenda item entitled "Global road safety crisis". I wish to avail myself of this opportunity to register our gratitude to the Permanent Mission of Oman for this initiative. I would also like to thank Secretary-General Kofi Annan for the informative report (A/58/228) that he has submitted to the General Assembly under this item.

According to the report of the Secretary-General, road traffic injuries have become a public health crisis of global dimensions. In 2000, 1.26 million people worldwide died as a result of road traffic injuries, accounting for 2.2 per cent of global mortality and ranking as the ninth leading cause of human death and morbidity. The World Health Organization (WHO) predicts that by 2020 road traffic injuries could rank third among the causes of death and disability, ahead of HIV/AIDS and malaria.

A cause of concern is the fact that the losses sustained by developing countries as a result of road traffic injuries far exceed those of developed countries. Of the 1.26 million road traffic fatalities in 2000, about 1.04 million occurred in developing countries, which translates into 88 per cent of the total number of deaths, whereas developed countries accounted for only 12 per cent. Faced with that grave situation, it stands to reason that the international community should enhance cooperation and endeavour to improve road safety in all countries, and in developing countries in particular. In that context, I wish to make four points.

First, ensuring road safety is a systemic undertaking that involves human beings, vehicles, roads, the environment and management. In formulating specific laws, policies and measures in an effort to eradicate causes of road traffic injuries, countries should take into account the overall picture and a whole range of factors.

Secondly, given that national Governments bear the primary responsibility for road safety, they should give priority to preventive interventions. In doing so, they should rely on the participation and collaboration of all sectors of society; heighten the safety awareness of relevant Government departments, transportation authorities and the general public; and ensure road safety.

Thirdly, it is imperative to effectively beef up international cooperation. Countries should increase their exchange of information, learn from one another and join their efforts to improve road safety. Because

developing countries suffer from economic constraints and their infrastructure and management techniques are yet to be perfected, the international community should provide them with the necessary financial, technical and managerial assistance.

Fourthly, the World Health Organization (WHO), which shoulders the weighty responsibility of keeping everyone in good health, should play an important role in coping with this problem. We have noted with pleasure that WHO has chosen the theme of road safety for World Health Day 2004. It is our hope that the events surrounding World Health Day will serve to further heighten public attention to road safety in all countries and make travelling a safer and more comfortable experience.

China is a developing country. Along with the sustained healthy growth of the Chinese economy over the past two decades, China's road construction and automobile industry have made significant headway. Questions such as how to try to improve road safety conditions, accelerate legislation on road safety, increase input in highway and urban road safety facilities, intensify the training and safety education of drivers, further improve road traffic accident prevention mechanisms and upgrade the treatment and rehabilitation of those injured in traffic accidents are major challenges facing the Chinese Government. We hope to enhance cooperation with the WHO and other international organizations and agencies, draw on the advanced experience of other countries and scale new heights in China's road safety capacity-building endeavours.

Mr. Vargas (Costa Rica) (*spoke in Spanish*): At the outset, I would like to thank the Permanent Mission of Oman for assuming this important initiative.

In the early days of the automobile, some people made fun of those slow moving vehicles by calling out "hitch a horse to it" as they passed by. Others welcomed the prospect that such an innovative machine would put an end to the reckless behaviour of horsemen who dashed down streets in full gallop, thereby endangering pedestrians. Over 100 years have lapsed since then, and both jokes and hopes have literally been run over by the almost unmanageable road crisis that, to one degree or another, affects all the countries of the world and whose consequences are reflected in alarming statistics.

Traffic accidents are today responsible for the disability of approximately 30 million people and cause more than 3 million deaths per year. Those numbers have made traffic accidents the principal cause for the loss of potential life-years. Road accidents require $500 billion annually in medical services and are responsible for a loss in productivity amounting to about 1 per cent of a country's gross domestic product. Nevertheless, those statistics do not begin to quantify the dimensions of individual and familial tragedies caused by traffic accidents, of which all of us have been, or may potentially be, victims.

Traffic accidents generate and multiply exponentially the complex sources of violence. They harm the economy and the environment and have damaging physical and psychological effects on human beings, as well as on such social and cultural values as security and solidarity and on efforts to improve quality of life.

The lack of road safety long ago ceased to be a problem of the developed world alone or a phenomenon limited to large urban centres. In my country, for example, the motorization index is growing exponentially, thereby increasing the risk of traffic accidents and producing a worrying rise in the emission of toxic gases. Between 1981 and 2002 the number of *in situ* deaths grew by 243 per cent. Although the percentage of deaths caused by traffic accident has gradually decreased, that reduction was not due to a net drop in the actual number of deaths but to the fact that there are currently many more non-fatal accidents. The number of accidents has doubled in the past 10 years, totalling 64,440 in the year 2002. For a nation of fewer than 4 million inhabitants, such numbers indicate that the lack of road safety is a very serious social and public health problem affecting mostly children, students and the majority of the economically active segment of the population.

For generations, road safety strategies have followed the traditional model of the "four Es". That model corresponds to the English words enforcement, engineering, education and emergency; in other words, to the laws pertaining to those words. However, it is necessary to expand that traditional model to include new, complementary strategies. With regard to Costa Rica itself, our road transit authorities are making strenuous efforts to refocus their work and achieve more concrete and effective results.

In that regard, my country has incorporated several new elements in its effort to achieve road safety as part of an approach that brings together various perspectives, policies, strategies, resources and expertise. Against that backdrop, in promoting road safety it is essential to take into account specific geographic, demographic, cultural and climactic characteristics. It is also essential to involve local governments, civil society and the private sector in devising and implementing road safety policies. Local management of road safety must result in the putting in place by the users of the road system itself of participatory approaches to the design, implementation, monitoring, control and evaluation of plans and programmes in the area road safety that take into account the local environment. Moreover, given the dynamic character of the road safety problem, it is necessary to decentralize the taking of political, technical and financial decisions.

I would in particular like to emphasize the importance of putting a human face on engineering. The decision-making process regarding the implementation of civil engineering work must take into account the particularities and special needs of the most vulnerable users of the transit system. Among other things, sustainable road safety requires the development of a road system defined by the abilities of the users of those roads. In that connection, a road system should not be more complicated than what the least competent user can negotiate. That is an idea we must consider.

From its earliest beginnings, the automobile was conceived as a tool in the service of human beings that would save time, physical effort and economic resources, not as an end in itself — and much less as a weapon of mass destruction. Let us join efforts to ensure that road transportation once again becomes a means of safely and quickly reaching a destination, and not an ongoing threat to every child and adult.

In conclusion, in addition to expressing our gratitude to the Secretary-General for his report on the global road safety crisis (A/58/223), I would once again like to thank the delegation of Oman for its leadership in the preparation of the draft resolution on this item, which we are happy to sponsor.

Mr. Mantovani (Italy): I have the honour to take the floor on behalf of the European Union. The acceding countries of Cyprus, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Malta, Poland, Slovakia and Slovenia, the associated countries of Bulgaria, Romania and Turkey and the Economic Free Trade Association countries of Iceland and Liechtenstein align themselves with this statement.

The European Union welcomes the report of the Secretary-General (A/58/228) on the need for a global effort to raise awareness about the health impact and social and economic costs of road traffic crashes and injuries. The magnitude of the burden posed by road traffic injuries is reflected by the figures cited in the report of the World Health Organization (WHO). It is also clear that this public health problem has a major effect on low- and middle-income countries and that it considerably undermines the achievement of sustainable development.

Despite the gravity of this public health problem, we are convinced that a great deal can be done to prevent and reduce road traffic injuries. Accidents on the roads are preventable, and their impact on society can be reduced by the political commitment of national Governments.

We can also do more on an international level to address this problem. To that end, we call for efforts by the United Nations system to support the development of policies on road safety and to promote the integration of road safety concerns into all relevant national policies — including those that relate to women, children and the elderly — within the overall framework of sustainable development. In that context the United Nations Development Programme, the WHO, the World Bank and UNICEF, as well as the regional development banks, should be called upon to play a major role through the United Nations Development Assistance Framework and the Poverty Reduction Strategy Paper process. The United Nations system can also contribute by providing assistance in the critical area of data collection. In that respect, the European Union welcomes the initiative by the WHO to designate road safety as the theme for World Health Day, which will be celebrated in Paris on 7 April 2004.

The European Union attaches great importance to the problem of road safety. That commitment is reflected in the European Commission's recent adoption of its European road safety action programme for the period 2003 — 2010, which aims at halving the number of road accident victims in the European Community as a whole by 2010. The same action

programme provides for the establishment of a European road safety observatory within the Commission.

The problem of road safety is on the agenda of the European Union. The ministries of transportation of the member States of the European Union will gather in Verona, Italy, in the next few days to discuss priority action lines in order to improve and harmonize security standards in Europe.

The European Union believes that saving human lives through an effective road safety policy is a difficult challenge, but it is also a moral obligation for all Member States.

Finally, speaking in my national capacity, let me add that Italy is ready to join the list of sponsors to draft resolution A/58/L.3, on the global road safety crisis.

The meeting rose at 6.05 p.m.